DEPARTMENT OF ADMINISTRATION DIVISION OF BANKING AND FINANCIAL INSTITUTIONS



BRIAN SCHWEITZER GOVERNOR

ANNIE M. GOODWIN COMMISSIONER

STATE OF MONTANA

301 SOUTH PARK, SUITE 316

(406) 841-2920

MEMORANDUM

To: Montana Escrow Business Licensees

From: Department of Administration

Division of Banking and Financial Institutions

Re: 2006 License Renewal

Montana law requires that Escrow Business Licenses be renewed annually. Your escrow business license will expire on June 30, 2006 unless renewed. Renewal forms must be received by the Division of Banking and Financial Institutions no later than June 1, 2006. Enclosed is the 2006 renewal application form. Complete in full and return to the Division with the \$100 renewal fee, payable to the State of Montana.

It is the responsibility of each licensee to accomplish renewal of its license. Failure to return the completed renewal form by June 1, 2006 will result in non-renewal of the license. In the event that the licenses expires due to non-renewal, you will be required to submit a new application with appropriate fees and to complete the application process to resume business. Please be advised that any activity that may occur during the processing period would be a violation of state law.

If you have any questions regarding the renewal process, please contact Chris Romano or Donna Zollinger at 406-841-2920.

Return to:

Division of Banking and Financial Institutions PO Box 200546 301 South Park, Suite 316 Helena MT 59620-0546

2006 APPLICATION ESCROW BUSINESS LICENSE RENEWAL

License Number		Date
To:	Department of Administration Division of Banking and Financial Institution PO Box 200546 301 South Park, Suite 316 Helena MT 59620-0546	ons
1.	The undersigned will continue Escrow Busi The license renewal fee of \$100.00 is enclosed	ness through June 30, 2007, and hereby renews its license. sed.
2.	. The Division has been notified of changes in personnel, ownership, or office location during the current year. (Attach information if applicable.)	
3.	Daily operation of our office has been in accordance with the provisions of the Regulation of Montana Escrow Businesses Act (Title 32, Chapter 7, MCA) and Administrative Rules 2.59.701 through 2.59.704.	
4.	 Corrections and adjustments required as a remade. 	esult of an examination conducted by the Division have been
We he	hereby certify the above information is correct	to the best of our knowledge and belief.
Licens	nsee Name	
Addre	ress	
Phone	ne	
Home	ne Office Address	
Phone	ne	
Dr.		I.a.,